FORM D

RECEIVE

UNITED STATES

1383793

	SECURITIES AND EXCHANGE COMMISSION
	Washington, D.C. 20549
	FORM D
X	

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Convertible Note Financing Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Brijit, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 1661 Harvard Street, N.W., Third Floor, Washington, DC 20009 (202) 725-7200 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Telephone Number (Including Area Code) **Executive Offices**) **Brief Description of Business** Publishing Type of Business Organization \boxtimes corporation limited partnership, already formed business trust limited partnership, to be formed other (please specify): Month Year Actual or Estimated Date of Incorporation or Organization: 0 6 Estimated 1 Actual THOMSON Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: FINANCIA CN for Canada; FN for other foreign jurisdiction) D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

A	T	יידי	UT	IO	M

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the is Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 	ssuer;
Check Box(es) that Apply: 🛛 Promoter 🖾 Beneficial Owner 🖾 Executive Officer 🖾 Director 🔲 General and/or Managing Parti	ner
Full Name (Last name first, if individual)	
Brosowsky, Jeremy M.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
z/o Brijit, Inc., 1661 Harvard Street, N.W., Third Floor, Washington, DC 20009	
Check Box(es) that Apply: A Promoter Beneficial Owner Executive Officer Director General and/or Managing Parts	
Full Name (Last name first, if individual)	
Dorr, Michael Benjamin	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Brijit, Inc., 1661 Harvard Street, N.W., Third Floor, Washington, DC 20009	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Parts	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Parts	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	,
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Parts	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Parts	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partr	ner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

					В.	INFOR	MATION A	ABOUT OF	FERING				
1. F	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No ⊠				
	Answer also in Appendix, Column 2, if filing under ULOE.												
2. V	What is the minimum investment that will be accepted from any individual?							\$	N/A_				
3. I	Does the	offering pe	rmít joint ow	nership of a	single unit?							Yes ⊠	No
n p													
d	lealer or	nly.											
Full N	•	ast name fir	st, if individu	al)									
		esidence Ac	ldress (Numb	per and Stree	t, City, State	, Zip Code)						· · · · · · · · · · · · · · · · · · ·	
Name	of Asso	ciated Brok	er or Dealer							·			
States	in Whic	h Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers							
(Ch	eck "Al	ll States" or	check individ	duals States)								☐ A	ll States
[A	.L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]	_]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
r.s.	1T]	[NE]	[NV]	[NH]	[LN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[iv	•								f357.4.3			(MAZ)	[PR]
[R	•	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[1 10]
[R	.1]		[SD]		[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[,]
[R	I] ame (La	ast name fir	st, if individu	al)			[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[7.8]
[R	I] ame (La	ast name fir		al)			[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	
Full N Busine	ame (La	ast name fir	st, if individu	al)			[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	
Full N Busine	ame (La	ast name fin esidence Ac	st, if individu	al) per and Stree	t, City, State	, Zip Code)		[VA]	[WA]	[WV]	[WI]	[WY]	[7.15]
Full N Busine Name States	ame (La ess or Re of Asso in Whice	esidence Acceptated Broke	st, if individual dress (Number or Dealer isted Has Sol	er and Stree	t, City, State	, Zip Code)			[WA]				Il States
Full N Busine Name States (Ch	ame (La ess or Re of Asso in Whice	esidence Acceptated Broke	st, if individual dress (Number or Dealer isted Has Sol	er and Stree	t, City, State	, Zip Code)							
Full N Busine Name States (Ch	ame (La ess or Re of Asso in Whice eck "Al	esidence Acceptated Broken Person Lil States" or	idress (Number or Dealer isted Has Sol	er and Stree icited or Inte	t, City, State	, Zip Code)						A	ll States
Full N Busine Name States (Ch [A	ame (La ess or Re of Asso in Whice eck "Al	esidence Acceptated Broken Person Lil States" or [AK]	ist, if individual idress (Number or Dealer isted Has Sol check individual	per and Street	ends to Solice	, Zip Code) it Purchasers [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	☐ A	ll States
Full N Busine Name States (Ch [A	ame (La ess or Re of Asso in Whice eck "Al L]	esidence Acceptated Broken Person Land I States or [AK]	Idress (Number or Dealer isted Has Sol check individual [AZ]	icited or Inteduals States) [AR] [KS]	ends to Solici	, Zip Code) it Purchasers [CO] [LA]	[CT]	[DE]	[DC] [[MA]	[FL]	[GA] [MN]	A	Il States [ID] [MO]
Full N Busine Name States (Ch [A [III]	ame (Lacess or Recof Associated Whice eck "All."]	esidence Acceptated Broken Person L. Il States" or [AK] [IN] [NE] [SC]	er or Dealer isted Has Sol check individe [AZ] [1A] [NV]	icited or Inteduals States) [AR] [KS] [NH] [TN]	ends to Solici	, Zip Code) it Purchasers [CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
Full N Busine Name States (Ch [A [III] R Full N	ame (La ess or Re of Asso in Whice eck "Al L] 4T] ame (La am	esidence Acceptated Broken Person Lil States" or [AK] [NE] [SC] ast name fire	Idress (Number or Dealer isted Has Sol check individual [AZ] [1A] [NV] [SD]	icited or Inteduals States) [AR] [KS] [NH] [TN]	(CA) [KY] [TX]	, Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
Full N Busine Name States (Ch [A [III] R Full N	ame (Lacess or Roof Associated White eck "All Lacess or Roof Associated White Eck "All Lacess" (Laces and Laces) (Laces and	esidence Acceptated Broken Person Line (States) or [AK] [NE] [SC] ast name fire esidence Acceptate (Sidence	idress (Number or Dealer isted Has Sol check individual [NV] [SD]	icited or Inteduals States) [AR] [KS] [NH] [TN]	(CA) [KY] [TX]	, Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
Full N Busine Name States (Ch [A [W Rull N Rull N Rull N Rusine	ame (Lacess or Record Associated Marketta Allacess or Record Associated Assoc	esidence Acceptated Broken Person Lil States" or [AK] [NE] [SC] ast name fire esidence Acceptated Broken Br	ist, if individual dress (Number or Dealer isted Has Sol check individual [NV] [SD] st, if individual dress (Number or Dealer	icited or Inteduals States) [AR] [KS] [NH] [TN] wer and Street	t, City, State ands to Solici [CA] [KY] [NJ] [TX]	, Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
Full N Busine Name States (Ch [A [III] R Full N Busine Name	ame (Lass or Resort Assort Ass	esidence Acceptated Broken Person Lil States" or [AK] [NE] [SC] ast name first esidence Acceptated Broken B	er or Dealer isted Has Sol check individe [AZ] [1A] [NV] [SD] st, if individu	icited or Inteduals States) [AR] [KS] [NH] [TN] al) per and Street	t, City, State ands to Solici [CA] [KY] [NJ] [TX]	, Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	Il States [ID] [MO] [PA] [PR]
Full N Busine Name States (Ch [M Full N Busine Name States (Ch	ame (Lass or Resort Assort Ass	esidence Acceptated Broken Person Lil States" or [AK] [NE] [SC] ast name first esidence Acceptated Broken B	er or Dealer isted Has Sol check individu [AZ] [1A] [NV] [SD] st, if individu Idress (Numb	icited or Inteduals States) [AR] [KS] [NH] [TN] al) per and Street	t, City, State ands to Solici [CA] [KY] [NJ] [TX]	, Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	Il States [ID] [MO] [PA] [PR]
Full N Busine Name States (Ch [M Full N Busine Name States (Ch	ame (Lass or Roof Assortin Whice eck "All Lass or Roof Assortin Whice eck "All Lass of Assortin Whice eck "All Lass of Lass or Roof Assortin Whice eck "All Lass of Lass or Roof Lass or Roof Assortin Whice eck "All Lass or Roof Assortin Whice eck "All Lass or Roof Assortin Whice eck "All Lass of Roof Assortin Whice eck "All Lass of Roof Assortin Whice eck "All Lass of Roof Assortin White eck "All Lass of Roof Assortin White eck "All Lass of Roof Assortin White eck "All Lass of Roof Assorting Roof Assortin White eck "All Lass of Roof Assorting Roof Roof Roof Roof Roof Roof Roof Roo	esidence Acceptated Broken Person Lil States" or [AK] [NE] [SC] ast name first esidence Acceptated Broken Broken Lil States" or Lil States or Lil State	er or Dealer isted Has Sol check individu [NV] [SD] st, if individu ddress (Numb	icited or Inte duals States) [AR] [KS] [NH] [TN] er and Street	(CA) [KY] [TX]	, Zip Code) it Purchasers [CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	Il States [ID] [MO] [PA] [PR]
Full N Busine Name States (Ch [M [R Full N Busine Name States (Ch [A [III]	ame (Lass or Roof Assortin Whice eck "All Lass or Roof Assortin Whice eck "All Lass of Assortin Whice eck "All Lass of Lass or Roof Assortin Whice eck "All Lass of Lass or Roof Lass or Roof Assortin Whice eck "All Lass or Roof Assortin Whice eck "All Lass or Roof Assortin Whice eck "All Lass of Roof Assortin Whice eck "All Lass of Roof Assortin Whice eck "All Lass of Roof Assortin White eck "All Lass of Roof Assortin White eck "All Lass of Roof Assortin White eck "All Lass of Roof Assorting Roof Assortin White eck "All Lass of Roof Assorting Roof Roof Roof Roof Roof Roof Roof Roo	esidence Acceptated Broken Person Lil States" or [AK] [NE] [SC] ast name first esidence Acceptated Broken Lil States ast name first esidence Acceptated Broken Lil States" or [AK]	er or Dealer [AZ] [NV] [SD] st, if individual dress (Numb	icited or Interduals States) [AR] [KS] [NH] [TN] al) per and Street icited or Interduals States) [AR]	t, City, State ands to Solici [CA] [KY] [NJ] [TX] t, City, State	, Zip Code) it Purchasers [CO] [LA] [NM] [UT] , Zip Code)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	A [HI] [MS] [OR] [WY] A [HI]	I States [ID] [MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	AND USE OF PROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount alread Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box indicate in the columns below the amounts of the securities offered for exchange and already exchange.	and nged. Aggregate	Amount Already
Type of Security Debt	Offering Price \$0	Sold S 0
Equity	· · · · · · · · · · · · · · · · · · ·	\$ 0
Common Preferred	Þ <u> </u>	ş <u>_</u>
Convertible Securities (including warrants)	¢ 450,000,00 [‡]	\$ 450,000.00 ¹
		\$ 430,000.00 \$ 0
Partnership Interests		<u> </u>
Other (Specify)		\$0
Total	\$ <u>450,000.00</u>	\$ <u>450,000.00</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
 Enter the number of accredited and non-accredited investors who have purchased securities in this of and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the num persons who have purchased securities and the aggregate dollar amount of their purchases on the total Enter "0" if answer is "none" or "zero." 	ber of	
	Number Investors	Aggregate Dollar Amount of Purchase
Accredited investors	8	\$ 450,000.00
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	······	\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sa securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of Offering	Type of	Dollar Amount
Rule 505	Security 0	Sold S 0
Regulation A		\$ 0
Rule 504		s 0
Total		
		\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securitie offering. Exclude amounts relating solely to organization expenses of the issuer. The information given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estin check the box to the left of the estimate.	may be	
Transfer Agent's Fees		S0
Printing and Engraving Costs		\$0
Legal Fees	🛛	\$5,000.00
Accounting Fees		s <u>0</u>
Engineering Fees		\$ <u> </u>
Sales Commissions (specify finders' fees separately)		\$ <u> </u>
Other Expenses (identify)		\$ <u> </u>
Total	_	\$ 5,000.00
¹ Under certain conditions, the principal and interest may be converted into the equity securities of t		

3896006_1.DOC/DC

C. OF	FFERING PRICE, NUMBER OF INVESTORS, EXPENS	ES AND USE OF PRO	CEEDS		
total expenses furnished in respon	he aggregate offering price given in response to Part C - Quest se to Part C - Question 4.a. This difference is the "adjusted g	ross		\$ <u>44</u>	5 <u>,000.00</u>
each of the purposes shown. If the	e adjusted gross proceeds to the issuer used or proposed to the amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal the adjusted gro to Part C - Question 4.b above.	e and check			
		Paymen Officers, Dir Affilia	ectors &		ents To ners
Salaries and fees		🗆 s	0	□ \$	0
Purchase of real estate		🗀 s	0	□ \$	0
Durchaga contal or leaving and inc	stallation of machinery and equipment	□ •	0	□ s	
_					
Construction or leasing of plant be	uildings and facilities	s	0	□ \$	0
Acquisition of other businesses (in used in exchange for the assets or	ncluding the value of securities involved in this offering that resecurities of another issuer pursuant to a merger)	may be	0	\$	0
Repayment of indebtedness		s	0	□ \$	0
Working capital		s	0	Ø \$ <u>44</u>	5,000.00
Other (specify):		s	0	□ s	0
Column Totals		🗆 s	0	⊠ \$ <u>44</u>	5,000.00
Total Payments Listed (column	mn totals added)	🛛	\$ <u>44</u>	5,000.00	
	D. FEDERAL SIGNATURE				
he issuer has duly caused this notice to be n undertaking by the issuer to furnish the on-accredited investor pursuant to paragr	be signed by the undersigned duly authorized person. If this notice U.S. Securities and Exchange Commission, upon written requestraph (b)(2) of Rule 502.	ce is filed under Rule 505, est of its staff, the informa	the following the street that	ng signature ned by the is	constitutes suer to any
ssuer (Print or Type)	Signature AAA AA	Date			
Brijit, Inc.	1/1/01.1/	June 28	2007		
same of Signer (Print or Type)	Title of Siggler (Print or Type)				
eremy M. Brosowsky	President and Chief Executive Officer	 	 .		
		TINI	T		
		EN	D		
	ATTENTION				

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)